



## Sample Closure/Termination Interview Form

Date: \_\_\_\_\_

Mentee's Name: \_\_\_\_\_

Mentor's Name: \_\_\_\_\_

Date of Matching: \_\_\_\_\_ Date of Termination: \_\_\_\_\_

1. What caused the termination?
2. Does the mentor have any suggestions for making the program more successful?
3. Does the mentee have any suggestions for making the program more successful?
4. Are there any misunderstandings or other issues to be resolved?
5. Would the mentor like to be rematched? \_\_\_ Yes \_\_\_ No
6. Would the mentee like to be rematched? \_\_\_ Yes \_\_\_ No

Form completed by: \_\_\_\_\_

Print Name